

## GENERAL FACT SHEET

BILL NUMBER 10K-328

BRIEF TITLE	APPROVAL DEADLINE	REASON
Annual Cleaning Services for Bid. 10-154		Multiple Year Contract - 4 years

## DETAILS

## POSITIONS/RECOMMENDATIONS

<p>Resolution to provide Annual Requirements for the cleaning services for Lincoln Libraries from ABM Janitorial North Central Region for Victor Anderson Branch, Bethany Branch, and South Branch as per Bid No. 10-154 for four years. This service will be used by the Lincoln Libraries for cleaning services.</p> <p>Price for <b>Victor E. Anderson Branch</b> is \$ 760.28 per month, \$9,123.36 for one year, and \$36,493.44 for the four (4) year period. Price for <b>Bethany Branch</b> is \$253.43 per month, \$3,041.16 for one year, and \$12,164.64 for the four (4) year period. Price for <b>South Branch</b> is \$380.14 per month, 4,561.68 for one year, and \$18,246.72 for the four (4) year period.</p> <p>*The low bidder Coverall of Omaha was interviewed by Purchasing and Library after the interview Coverall of Omaha backed out of their bid. Bid was then awarded to X-tra Kleen and Executive Janitorial. After Executive Janitorial returned their signed contract documents. Purchasing received an email that Executive Janitorial was backing out of their bid. Executive Janitorial line items are being given to <b>ABM Janitorial North Central Region</b> in this resolution.</p>	Sponsor	Purchasing
	Program Departments, or Groups Affected	Lincoln Libraries
	Applicants/ Proponents	Applicant:  Purchasing  City Department: Other
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals   Basis of Opposition
	Staff Recommend.	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommend.	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

## DETAILS

## POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES _____ _____ _____
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____
	<b>FINANCES</b>	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ _____ COST of this Ordinance/Resolution \$ _____
		RELATED annual operating Costs \$ _____
		INCREASE REVENUE EXPECTED/YEAR \$ _____
	SOURCE OF FUNDS	CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ %
NON CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ %		
<b>BENEFIT COST</b> <input type="checkbox"/> Front Foot <input type="checkbox"/> Square Foot    \$ _____    Average Assessment \$ _____		

APPLICABLE DATES:

FACT SHEET PREPARED BY: Shelly Hinze

REVIEW BY:

REFERENCE NUMBER